

MENTAL HEALTH UPDATE

July 29, 2009

Pieces Of History In Vermont Mental Health

The “Pieces of History” series in the Mental Health Update describes key events and significant policy milestones in the evolving Mental Health Systems of Care, thus, connecting our past to the present.

1901 Wasson Hall was constructed as a residence for female nurses and attendants at the Vermont State Hospital. This use continued until 1948 when Stanley Hall was built and became the new nurses residence. The old residence was remodeled for married couples who worked at the hospital. In 1950, it was named Wasson Hall in honor of former superintendent, Dr. Watson L. Wasson, who was a VSH physician on staff in 1901 and also held a faculty appointment in the College of Medicine at the University of Vermont. Dr. Wasson’s appointment in 1917 as Superintendent of VSH was announced in the journal of the American Association for the Advancement of Science (AAAS). Dr. Wasson was stricken with influenza the following year and died during the great outbreak that left the hospital with few doctors and half the nurses to care for sick patients. A decade later, the hospital was inundated by the 1927 flood. With the flood waters rising two feet above the second floor of the nurses residence, all but three of the nurses left the home on a raft made by an attendant. More recently, Wasson Hall served the rehabilitation needs of state hospital patients and in 1972 transitioned to a halfway home no longer part of the Vermont State Hospital. It was the administrative headquarters for the Community College of Vermont from the mid-1980’s until 2009. Later this year, Wasson Hall will become the new location for the Department of Mental Health. The legacy of Dr. Wasson was summed up by his widow in a commemorative where she wrote, “He was intensely interested in developing treatments that would allow people to return to normal life and not spend their lives totally cared for by others.”

ADULT MENTAL HEALTH

Lamoille County Mental Health Announces New Name and New Location!

The Board of Directors of Lamoille County Mental Health Services is pleased to announce the opening of their new facility on August 3rd. The new site was formally the Genesis Long Term care facility. The 30,000 square foot facility will house all of the programs and administration. Having all of the programs under one roof will enhance coordination, access, and be cost efficient. In addition to the new facility, the agency has also changed its name to “Lamoille Community Connections”.

CHILDREN'S MENTAL HEALTH

Out of the Darkness Community Walk

The Vermont Chapter of the American Foundation for Suicide Prevention (AFSP) will host an ***Out of the Darkness Community Walk*** in early October. In addition to raising funds for AFSP research and services, this annual, nationwide event provides an opportunity for survivors of suicide loss to honor their loved ones and to join with concerned others in breaking the silence and stigma that often surround suicide. In the United States alone, a person dies by suicide every 16 minutes, which amounts to 32,000 lives per year; in Vermont, suicide is the second leading cause of death among teens and young adults.

You don't have to be a survivor in order to participate. Funds raised by the community walk will go to AFSP research and education programs aimed at

- saving lives,
- increasing national awareness about depression and other mood disorders, and
- assisting those impacted by suicide.

The walkers will assemble at Battery Park in Burlington at 10:00 am on October 3 for coffee and bagels. Following a brief ceremony, participants will walk three miles from Battery Park to the UVM Green and back again. Members of the Vermont Youth Suicide Prevention Coalition will be there to launch the U_Matter campaign, a statewide program dedicated to creating communities of hope in which schools, agencies and people of all ages are given the knowledge, skills and resources to respond effectively to suicidal behavior in youth.

If you would like to support a walker, donate online or register to participate in the Out of the Darkness Community Walk, go to www.outofthedarkness.org and follow the links to the Vermont donor page. For further information contact Linda Livendale at ljlivendale@yahoo.com or 802.479.9450. For information on the U_Matter Youth Suicide Prevention Program, contact Brian Remer at brian@healthandlearning.org or 802.254.6590.

Youth in Transition Grant

The Youth in Transition Operations Team members will be away for the week of July 27 to participate in a required System of Care Grantees' meeting. This will be the first time most have been exposed to such a rich array of workshops about youth involvement, cultural and linguistic competence, evaluation, and social marketing. We fully expect to return with a lot of ideas and enthusiasm for making a difference here for young adults aged 16-21 with serious emotional disturbance. And we will share those ideas with the regions; we are already planning a series of webinars using the new DMH ilinc system.

FUTURES PROJECT

Responses from Local General Hospitals for VSH Replacement Beds

Late last month, DMH issued a "Request for Bids or Conceptual Proposals" to all Vermont hospitals for inpatient psychiatric acute care proposals to replace VSH. The RFP envisions two levels of response depending on how developed the proposal plans are. Proposals are due August 28 and will be used to create the "Master Plan" to replace VSH that is required by the legislature.

The following hospitals responded with plans to submit a proposal:

- Fletcher Allen Health Care
- Rutland Regional Medical Center
- Springfield Hospital
- Brattleboro Retreat
- Dartmouth-Hitchcock Medical Center.

DMH also heard from the following hospitals that they would not offer a proposal:

- Grace Cottage Hospital
- Northeastern Vermont Regional Hospital*
 - *Northeastern VT Regional Hospital did express high level commitment and concerns about creating more general psychiatric and mental health resources in the northeastern region of the state.
- Northwestern Medical Center
- North County Health System

The letters of intent can be found on the DMH website at

<http://healthvermont.gov/mh/futures/futureshome.aspx>

Transformation Council

Transformation Council members supported a series of next steps as recommended by the Peer Support Program Development Workgroup, which presented their vision for a Vermont Crisis Alternative (VCA) program that would be operated by a new, nonprofit entity guided by an Advisory Board. Initially, Vermont Psychiatric Survivors (VPS) will act as the sponsoring organization to oversee the hiring of a project coordinator, create an advisory board, and work with them to establish a 501 (c)(3) organization to operate the program. The VCA will offer a non-medical, peer-to-peer model that can provide guests of the house with the personal knowledge, comradeship, and support needed for recovery. In mapping out tasks and timelines, the coordinator and advisory board will work on the many aspects of developing a program including funding, location, staffing, and training. Transformation Council members concurred with the essence of the workgroup's recommendation while recognizing that there are many specific questions and options to be considered. Council members and stakeholders are encouraged to comment on the recommendations and to send DMH their concerns.

The discussion was enhanced by the personal experience of a peer who came to share his story of successfully transitioning from the Vermont State Hospital to the community where he found the comfort, support, and flexibility that helped in his recovery. At the time of acute illness, he shared, professionals can maintain the necessary understanding

of brain functioning and medical intervention whereas peers can provide the socialization, hope, friendship, and perspective as recovery begins.

VERMONT INTEGRATED SERVICES INITIATIVE (VISI)

VISI Forum:

The next VISI Forum will be held on August 7th at the Capitol Plaza, Montpelier from 9:30 until 12:30. This Forum meeting is to serve as an update about VISI developments and progress as well as an opportunity to learn about models of collaboration between provider and peer organizations. If you are interested in joining this meeting, please contact Patty Breneman at (802) 652-2033 or pbrenem@vdh.state.vt.us.

VERMONT STATE HOSPITAL

U.S. DOJ Inspectors Issue Sixth Compliance Report on Vermont State Hospital as part of Memorandum of Agreement

In 2006, the State of Vermont and Department of Justice (DOJ) reached a settlement regarding conditions at Vermont State Hospital in Waterbury. The DOJ required the State to implement reforms to ensure that patients at the facility were adequately protected from harm, and adequate services were provided, including mental health care.

The sixth and most recent compliance report, released on July 27, 2009 “acknowledge(s) the efforts of the staff of VSH in working towards meeting the requirements of the Settlement Agreement.” The DOJ experts note, “Progress continues to be significant.”. The report concluded that Vermont State Hospital continues to make significant improvements in many areas including treatment planning, interventions and programming, psychological and psychiatric assessments, discharge planning and community integration, incident management and quality improvement.

The sixth compliance visit was conducted in May, 2009 by two clinical experts (Dr. Mohamed El-Sabaawi and Dr. Jeffrey L. Geller) appointed by the DOJ to assess Vermont State Hospital. Over a three-year period, Dr. El-Sabaawi and Dr. Geller, along with DOJ attorneys, have been regularly assessing the state’s improvement. The Agreement concludes in July, 2010.

The DOJ experts included the following praise for VSH: “VSH has again made major gains since our last compliance visit. We acknowledge that the hard work done by VSH staff has resulted in the third Compliance Report with no finding of noncompliance.”

A report of findings and recommendations was first issued from the DOJ on July 5, 2005 following a three-day, on-site inspection by DOJ officials in September 2004. Since the first report of findings by DOJ in 2005, the Douglas Administration has substantially increased funding, staffing, and support for Vermont State Hospital.

The Department of Justice assessment report is posted on the Mental Health Department’s website at <http://healthvermont.gov/mh/index.aspx>

Seclusion & Restraint Reduction Grant Hosts Sensory Modulation Expert

On July 9th and 10th, the Seclusion and Restraint Reduction Intervention grant hosted the first of many consultations with Sensory Modulation Expert, Tina Champagne, OTR/L at VSH. Tina is a nationally recognized expert in the application of sensory modulation modalities for inpatient settings for children, adolescents and adults. Tina has been working with the Brattleboro Retreat for several months already, but was finally able to begin her highly anticipated consult with members of the VSH community. Tina met with staff at all levels, members of the Seclusion and Restraint Reduction Interventions (SRRI) Advisory Council, and other public members during her visit. Tina provided several educational presentations on the topic of sensory modulation and responded to the large number of questions generated by folks in attendance. VSH Leadership will next meet with Tina in the upcoming months to collaboratively develop an implementation plan that works to integrate sensory modulation activities into the many on going improvement projects occurring at the hospital. Great effort is being expended by patients and staff members in finding ways to reduce individual crisis events at VSH and it is hoped that the addition of several sensory modulation tools in the future will assist in that work. As future interventions and trainings occur, we will share them with you in these pages.

If you have any questions, please contact Ed Riddell, the Alternatives to Restraint and Seclusion Coordinator @ VSH, 802-241-2303 or eriddell@vdh.state.vt.us.

Safety Plans at VSH

Training programs currently underway at VSH (Pro-ACT and Trauma Informed Care) stress the importance of patients having a Safety Plan (sometimes referred to as a Crisis Plan). Safety Plans help identify Triggers (things that make someone angry or upset), Warning Signs (indications that one may lose control, and Prevention Strategies (things that might help one to feel better).

Leadership at VSH wants to ensure that there is a coordinated process at VSH where patients and staff can collaborate to develop a Safety Plan that is then integrated into the patient's treatment plan. A multidisciplinary team facilitated by Education and Training, has started to work on this process.

The team is in its early stages, but among the issues being explored:

- how to involve patients in developing this process
- ensuring communication with outpatient providers
- how to make the plan readily available to both patients and staff
- a way to revise the plan if needed
- developing a format that is customer-friendly and useful

The process will continue until it is fully developed, at which time review, approval, and implementation can take place.

VERMONT STATE HOSPITAL CENSUS

The Vermont State Hospital Census was 51 as of midnight Monday. The average census for the past 45 days was 48.